



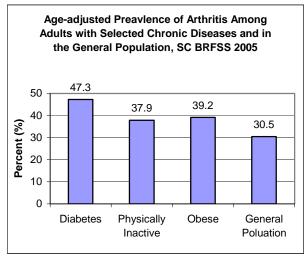
# Prevalence of Chronic Conditions Among Adults with Arthritis and Related Health Status, SC BRFSS 2005

### **Arthritis and Co-morbid Conditions**

As with most other chronic diseases, the prevalence of arthritis in the adult population of South Carolina has increased. Approximately one-third of all non-institutionalized adults in South Carolina report having doctor-diagnosed arthritis; the age-adjusted prevalence of arthritis among South Carolina adults was 29.4% in 2004 and 30.5% in 2005.

Additionally, chronic conditions affect a majority of people with arthritis. The existence of two or more chronic conditions with other chronic conditions is known as co-morbidity. Co-morbidity can decrease quality of life.

In both 2004 and 2005, the prevalence of chronic conditions such as diabetes was statistically significantly higher among those adults with arthritis when compared to the general population.



In South Carolina in 2005, the prevalence of obesity amongst those adults with arthritis was higher in women than in men.

Table 1. Prevalence of Arthritis Among Adults
<b>Chronic Conditions in South Carolina, BRFSS</b>
2005

Characteristics	Adults with Diabetes	Adults with Physical Inactivity	Adults with Obesity
Gender Male Female	40.9 50.2	34.9 39.2	36.1 42.1
Race White Black	49.3 43.0	39.9 36.9	40.0 38.2

#### **Health Status**

Health Status, or how one responds to the question: How would you describe your general health, is used on the BRFSS as a basic quality of life question.

In 2004 and 2005, those with arthritis were more likely to report a higher prevalence of having fair or poor health than those adults in the general population (29.9% versus 17.1%).

The age-adjusted prevalence of having fair or poor health among those with arthritis and diabetes and arthritis and physical activity is higher than the prevalence among those adults with arthritis alone. For those with obesity and arthritis, the prevalence of fair or poor health is not statistically different from those with arthritis alone.

Males with arthritis and diabetes report a higher prevalence of poor and fair health compared to females with arthritis and diabetes.

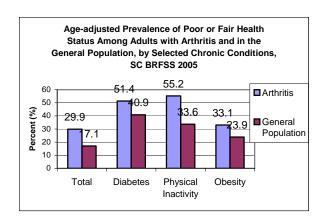


Table 2 Age-adjusted Prevalence of Poor or Fair Health Among Adults with Arthritis and Co-morbid Conditions, SC BRFSS 2005				
Characteristics	Adults with Diabetes and Arthritis	Adults with Physical Inactivity and Arthritis	Adults with Obesity and Arthritis	
Gender Male Female	62.7 41.2	47.5 57.2	29.5 35.6	
Race White Black	51.1 57.9	58.5 54.1	30.6 38.6	

## **Average Days of Poor Physical and Mental Health**

Among those adults with arthritis, the average number of days of poor physical and mental health is higher than the average number of days in the general population.

Those with arthritis and diabetes and arthritis and physical activity report a higher average number of days of poor physical health than those respondents with arthritis alone. This number sometimes is double or triple the average found in the general population.

The average number of days of poor mental health for those with arthritis and physical inactivity is higher than those with arthritis alone.

Table 3. Average Number of Days of Poor Physical or Mental Health in the last 30 days Arthritis and Chronic Conditions Among Adults in South Carolina, BRFSS 2005

Characteristics	Average number of days of Poor Physical Health in the Last 30 days	Average number of days of Poor Mental Health in the Last 30 days
General Population	3.8	3.6
Arthritis Alone	7.6	5.3
Arthritis and Diabetes	10.4	6.1
Arthritis and Obesity	8.6	6.0
Arthritis and Physical Inactivity	15.2	7.9

Among those with arthritis and diabetes, females reported a significantly higher average number of days of poor mental and physical health than males. There was no reportable difference in average number of days of poor physical or mental health between whites and blacks.

Among those with arthritis and obesity, females reported a significantly higher average number of days of poor mental health than males. There was no reportable difference in average number of days of poor physical or mental health between whites and blacks.

Among those with arthritis and physical inactivity, there were no reportable differences in the reported average number of days of poor physical or mental health between races or between genders.

#### Conclusion

Those adults with arthritis and co morbid conditions in South Carolina report a higher number of days of poor physical health and a higher prevalence of poor or fair health than those with arthritis alone and those from the general population.